



# National Institute on Drug Abuse (NIDA) North Dakota Opioid Summary

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## **North Dakota Opioid Summary**

### **Drug Overdose Deaths**

In 2017, there were more than 70,200 drug overdose deaths in the U.S.-an age-adjusted rate of 21.7 per 100,000 persons. Among these, 47,600 involved opioids. The sharpest increase occurred among deaths involving fentanyl and fentanyl analogs (other synthetic narcotics) with more than 28,400 overdose deaths in 2017.

There have been no significant changes in the age-adjusted rate of drug overdose deaths in North Dakota. In 2017 there were 9.2 drug overdose deaths per 100,000 persons. While the majority of drug overdose deaths in 2017 involved an opioid, overdose deaths involving opioids are not included for the state because the data reported did not meet inclusion criteria (see <a href="Scholl L">Scholl L</a>, et al. <a href="MMWR Morbidity and Mortality Weekly Report 2019;67:1419-1427">Mortality Weekly Report 2019;67:1419-1427</a>).

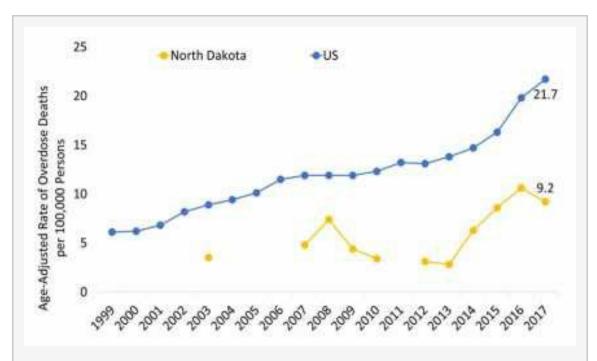
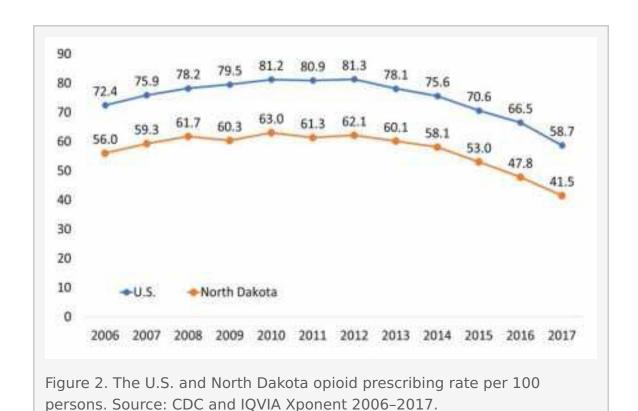


Figure 1. Drug overdose deaths, rate per 100,000 persons, in the U.S. and North Dakota. Source: CDC WONDER.

### **Opioid Pain Reliever Prescriptions**

In 2017, North Dakota providers wrote 41.5 opioid prescriptions for every 100 persons (Figure 2) compared to the average U.S. rate of 58.7 prescriptions (CDC). This represents a 34 percent decrease from a peak of 63.0 opioid prescriptions per 100 persons in 2010.



### **Neonatal Abstinence Syndrome (NAS)**

NAS or neonatal opioid withdrawal syndrome (NOWS) may occur when a pregnant woman uses drugs such as opioids during pregnancy. A recent national study revealed a fivefold increase in the incidence of NAS/NOWS between 2004 and 2014, from 1.5 cases per 1,000 hospital births to 8.0 cases per 1,000 hospital births. This is the equivalent of one baby born with symptoms of NAS/NOWS every 15 minutes in the United States. During the same period, hospital costs for NAS/NOWS births increased from \$91 million to \$563 million, after adjusting for inflation (Figure 3).

To date, there is no standard in NAS/NOWS provider and hospital coding practices (CDC). As a result, there is variability in trends and in the rates reported by states. The most recent data on the rate of babies born with NAS/NOWS in North Dakota is from 2014 and is based on state inpatient databases. From 2011 to 2014, the rate of NAS/NOWS increased from 1.7 cases per 1,000 hospital births to 4.8 cases per 1,000 hospital births (Healthcare Cost and Utilization Project).

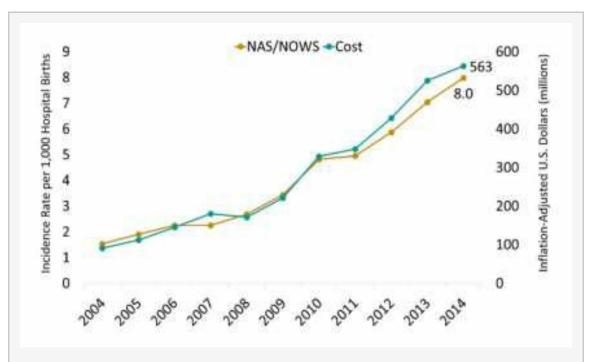


Figure 3. NAS/NOWS Incidence rate and hospital costs for treatment in the United States. Source: T.N.A. Winkelman, et al., 2018.

# HIV Prevalence and HIV Diagnoses Attributed to Injection Drug Use (IDU)

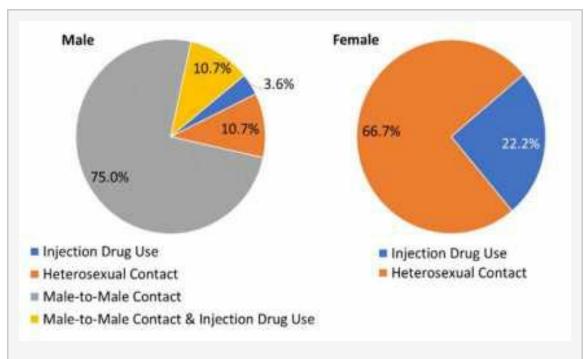


Figure 4. North Dakota: Estimated percent of male vs. female with new HIV diagnoses, by transmission category, 2016. Source: CDC and www.AIDSVU.org.

- **U.S. Incidence:** In 2016, 9 percent (3,480) of the 39,589 new diagnoses of HIV in the United States were attributed to IDU. Among males, 6.3 percent (2,530) of new cases were transmitted via IDU or male-to-male contact and IDU. Among females, 2.3 percent (950) were transmitted via IDU (CDC).
- **U.S. Prevalence:** In 2016, 991,447 Americans were living with a diagnosed HIV infection—a rate of 306.6 cases per 100,000 persons. Among males, 19.9 percent (150,4661) contracted HIV from IDU or male-to-male contact and IDU while 21 percent (50,154) of females were living with HIV attributed to IDU (CDC).
- State Incidence: Of the new HIV cases in 2016, 46 occurred in North Dakota. Among males, 14.3 percent of new HIV cases were attributed to IDU or male-to-male contact and IDU. Among females, 22.2 percent of new HIV cases were attributed to IDU (Figure 4) (AIDSVu).
- **State Prevalence:** In 2015, an estimated 334 persons were living with a diagnosed HIV infection in North Dakota—a rate of 53 cases per 100,000 persons. Of those, 18.6 percent of male cases were

attributed to IDU or male-to-male contact and IDU. Among females, 14.1 percent were living with HIV attributed to IDU (AIDSVu).

# Hepatitis C (HCV) Prevalence and HCV Diagnoses Attributed to Injection Drug Use<sup>1</sup>

- **U.S. Incidence:** In 2016, there were an estimated 41,200 new cases of acute HCV<sup>2</sup> (<u>CDC</u>). Among case reports that contain information about IDU, 68.6 percent indicated use of injection drugs (<u>CDC</u>).
- **U.S. Prevalence**: An estimated 2.4 million Americans are living with HCV based on 2013-2016 annual averages (<u>CDC</u>).
- State Incidence: There was approximately 1 new case of acute HCV (0.1 per 100,000 persons) reported in North Dakota in 2016 (CDC).
- **State Prevalence**: In North Dakota, there are an estimated 2,600 persons living with Hepatitis C (2013-2016 annual average), a rate of 460 cases per 100,000 persons (<u>HepVu</u>).

#### **Additional Resources**

- Official Portal for North Dakota State Government, <u>Opioids</u> and <u>North Dakota Substance Abuse Data</u>
- Centers for Disease Control and Prevention, Opioid Overdose



FY2018 NIH-funded projects related to opioid use and use disorder in North Dakota: 0

### Find treatment in North Dakota (SAMHSA)

#### **Notes**

- 1. Not all states collect or report data on the incidence or prevalence of Hepatitis C or on how Hepatitis C is transmitted. When available, the data will be included.
- 2. Actual acute cases are estimated to be 13.9 times the number of reported cases in any year.